

SENDER: COMPLETE

DELIVERY

CERTIFIED MAIL

- Complete items 1, 2, 3, and 4 if Restricted
- Print your name and address so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Adale Hall

C. Date of Delivery

1-19-12

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

1. Article Addressed to:

Kenneth L. Lawson
332 Backlawn St.
Cincinnati, OH 45215

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7010 3090 0000 8524 8502

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540